

FEC FORM 2

STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) Mr Ron Harold Johnson			2. Candidate's FEC Identification Number SOWI00197	
(b) Address (number and street) 2810 Crossroads Drive #3900		<input checked="" type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Madison WI 53718		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate WI		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Ron Johnson for Senate Inc.		
(b) Address (number and street) 219 E Washington Avenue Suite 101		
(c) City, State, and ZIP Code Oshkosh WI 54901		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Badger Victory Fund		
(b) Address (number and street) 138 Conant Street 2nd Floor		
(c) City, State, and ZIP Code Beverly MA 01915		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Mr. Ron Harold Johns	Date 02/25/2016
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Americans United for Freedom

(b) Address (number and street)

228 S Washington St
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Johnson Victory Committee

(b) Address (number and street)

228 S Washington St
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Target Races Committee

(b) Address (number and street)

228 S. Washington Street
Suite 115

(c) City, State and ZIP Code

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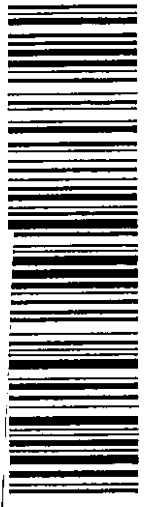
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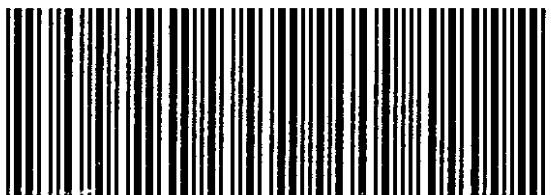
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